

**STATEMENT OF ECONOMIC INTERESTS
FOR
PRINCIPAL INVESTIGATORS**

D
y

Campus: San Diego

UCSD #: 2009-0249

Please type or print in ink

NAME (LAST)	(FIRST)	(MIDDLE)	TELEPHONE NUMBER
Zhang	Kang		(858) 534-8757
ACADEMIC UNIT OR DEPARTMENT		MAIL CODE	E-MAIL ADDRESS
Ophthalmology		0946	kangzhang@ucsd.edu
TITLE OF RESEARCH PROJECT			
GALLEY2: Genetic Assessment of early to Late macuLar dEgeneration studY 2			

1. Information Regarding Funding Entity:

(Use a separate Form 700-U for each funding entity.)

Name of Entity:

Genentech

Address of Entity:

1 DNA Way; South San Francisco, CA, 94080

Principal Business of Entity:

Pharmaceuticals

Amount of Funding: \$ 300,000

Estimated ☒ Actual ☐

2. Type of Statement (Check at least one box)

☒ Initial (for new funding)

Date of initial funding: 8 / 1 / 08

☐ Interim (for renewed funding)

Funding was renewed on: / /

3. Filer Information

A. Are you a director, officer, partner, trustee, consultant, employee, or do you hold a position of management in the entity listed in Part 1? No ☐ Yes ☒

Title: **Consultant**

B. Do you, your spouse or registered domestic partner, or your dependent children have an investment of \$2,000 or more in the entity listed in Part 1 above?

No ☒ Yes ☐ - value is:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Exceeds \$1,000,000

If you have sold or divested yourself of investments:

Date Divested: / /

C. Have you received income of \$500 or more from the entity listed in Part 1 within the last 12 months?

No ☐ Yes ☒ - amount is:

☐ \$500 - \$1,000

☒ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ Exceeds \$100,000

Was income received through your spouse or registered domestic partner? ☒ No ☐ Yes

3. Filer Information - Cont.

D. Have you received loans from the entity in Part 1 for which the balance exceeded \$500 in the past 12 months?

No ☒ Yes ☐ - highest balance:

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ Exceeded \$100,000

If you checked "yes," was the loan:

☐ Secured ☐ Unsecured Interest rate: %

Was the loan entirely repaid within the last 12 months?

☐ No

☐ Yes

E. Have you received gifts from the entity listed in Part 1 within the last 12 months valued at \$50 or more?

No ☒ Yes ☐ - describe below.

Description:

Value: \$

Date Received: / /

F. Has the entity in Part 1 paid you for your travel?

No ☐ Yes ☒ - describe below.

Type of Payment: (check one) ☒ Gift ☐ Income

Amt: \$ date(s): / / (If applicable)

Description: Hotel rooms for 2 seminars, one night each

4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 8/14/08

(month, day, year)

Signature [Signature]

(File the originally signed statement with your university.)

STATEMENT OF ECONOMIC INTERESTS
FOR
PRINCIPAL INVESTIGATORS

Campus: _____

UCSD # 20100668

Please type or print in ink

NAME (LAST) Zhang	(FIRST) Kang	(MIDDLE)	TELEPHONE NUMBER 858-246-0823
ACADEMIC UNIT OR DEPARTMENT Ophthalmology		MAIL CODE 0946	E-MAIL ADDRESS k5zhang@ucsd.edu
TITLE OF RESEARCH PROJECT HARBOR study			

1. Information Regarding Funding Entity:

(Use a separate Form 700-U for each funding entity.)

Name of Entity:

Genentech, Inc.

Address of Entity:

1 DNA Way, South San Francisco, CA 94080-4990

Principal Business of Entity:

Pharmaceutical Company

Amount of Funding: \$ **839,640.00**

Estimated ☒ Actual ☐

2. Type of Statement (Check at least one box)

☒ Initial (for new or renewal funding)

Date of Funding: _____

☐ Completion Statement

The research project expired on: _____

3. Filer Information

A. Are you a director, officer, partner, trustee, consultant, employee, or do you hold a position of management in the entity listed in Part 1? No ☐ Yes ☒

Title: **Consultant**

B. Do you, your spouse or registered domestic partner, or your dependent children have an investment of \$2,000 or more in the entity listed in Part 1 above?

No ☒ Yes ☐ - value is:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Exceeds \$1,000,000

If you have sold or divested yourself of investments:

Date Divested: _____

C. Have you received income of \$500 or more from the entity listed in Part 1 within the last 12 months?

No ☒ Yes ☐ - amount is:

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ Exceeds \$100,000

Was income received through your spouse or registered domestic partner? ☒ No ☐ Yes

3. Filer Information - Cont.

D. Have you received loans from the entity in Part 1 for which the balance exceeds \$500 in the past 12 months?

No ☒

Yes ☐ - highest balance is:

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ Exceeds \$100,000

If you checked "yes," was the loan:

☐ Secured

☐ Unsecured

Interest rate: _____ %

Was the loan entirely repaid within the last 12 months?

☐ No

☐ Yes

E. Have you received gifts from the entity listed in Part 1 within the last 12 months valued at \$50 or more?

No ☒

Yes ☐ - describe below

Description of Gift: _____

Value: \$ _____

Date Received: _____

F. Has the entity in Part 1 paid you for your travel?

No ☐

Yes ☒ - describe below

Type of Payment: (check one)

☒ Gift

☐ Income

Amt: \$ _____ date(s): _____

(if applicable)

Description: _____

4. Verification

I have used all reasonable diligence in preparing this statement. I have revised this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

9/16/09

(month, day, year)

Signature

[Signature]

File the originally-signed statement with your university

09/1208

STATEMENT OF ECONOMIC INTERESTS
FOR
PRINCIPAL INVESTIGATORS
A Public Document

Date Received
Campus Use Only

Campus: SAN DIEGO

ID No: _____

Please type or print in ink.

NAME (LAST)	(FIRST)	(MIDDLE)	TELEPHONE NUMBER
Zhang	Kang		(858) 246.0823
ACADEMIC UNIT OR DEPARTMENT	MAIL CODE	E-MAIL ADDRESS	
Ophthalmology	0946	kangzhang@ucsd.edu	
TITLE OF RESEARCH PROJECT			
Clinical Assessment Of Age-related Macular Degeneration Patients After Early DiagnoSiS and Treatment with Ranibizum			

1. Information Regarding Funding Entity

(Use a separate Form 700-U for each funding entity.)

Name of Entity:

Genentech, Inc.

Address of Entity:

Principal Business of Entity:

Pharmaceutifcals

Amount of Funding: \$ 620,000

Estimated ☒ Actual ☐

2. Type of Statement (Check at least one box)

☒ Initial (for new funding)

Date of initial funding: UN / UN / 11

☐ Interim (for renewed funding)

Funding was renewed on: / /

3. Filer Information

A. Are you a director, officer, partner, trustee, consultant, employee, or do you hold a position of management in the entity listed in Part 1? No ☒ Yes ☐

Title: _____

B. Do you, your spouse or registered domestic partner, or your dependent children have an investment of \$2,000 or more in the entity listed in Part 1 above?

No ☒ Yes ☐ – value is:

☐ \$2,000 - \$10,000

☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000

☐ Exceeds \$1,000,000

Date Disposed: / / , if applicable

C. Have you received income of \$500 or more from the entity listed in Part 1 during the reporting period?

No ☐ Yes ☒ – amount is:

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ Exceeds \$100,000

Was this income received through your spouse or registered domestic partner? ☒ No ☐ Yes

3. Filer Information - Cont.

D. Have you received loans from the entity in Part 1 for which the balance exceeded \$500 during the reporting period?

No ☒ Yes ☐ – highest balance:

☐ \$500 - \$1,000

☐ \$1,001 - \$10,000

☐ \$10,001 - \$100,000

☐ Exceeded \$100,000

If you checked "yes," was the loan:

☐ Secured ☐ Unsecured Interest rate: %

Was the loan entirely repaid within the last 12 months?

☐ No ☐ Yes

E. Have you received gifts from the entity listed in Part 1 within the last 12 months valued at \$50 or more?

No ☐ Yes ☐ – describe below.

Description: _____

Value: \$ Date Received: / /

F. Has the entity in Part 1 paid for your travel during the reporting period? No ☐ Yes ☒ – describe below.

Type of Payment: (check one) ☐ Gift ☐ Income

Amt: \$ date(s): / / / /
(If applicable)

Description: _____

4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 3/22/11
(month, day, year)

Signature [Signature]
(File the originally signed statement with your university.)

STATEMENT OF ECONOMIC INTERESTS
FOR
PRINCIPAL INVESTIGATORS

D

Please type or print in ink

Campus:

UCSD #: 18141

NAME (LAST)	(FIRST)	(MIDDLE)	TELEPHONE NUMBER
Zhang	Kang		(858) 534-8757
ACADEMIC UNIT OR DEPARTMENT		MAIL CODE	E-MAIL ADDRESS
Ophthalmology		0946	kangzhang@ucsd.edu
TITLE OF RESEARCH PROJECT			
GALLEY2: Genetic Assessment of early to Late macular dEgeneration study 2			

1. Information Regarding Funding Entity:

(Use a separate Form 700-U for each funding entity.)

Name of Entity:

Genentech

Address of Entity:

1 DNA Way; South San Francisco, CA, 94080

Principal Business of Entity:

Pharmaceuticals

Amount of Funding: \$ 300,000

Estimated ☒ Actual ☐

2. Type of Statement (Check at least one box)

☒ Initial (for new funding)

Date of initial funding: 8 / 1 / 08

☐ Interim (for renewed funding)

Funding was renewed on: / /

3. Filer Information

A. Are you a director, officer, partner, trustee, consultant, employee, or do you hold a position of management in the entity listed in Part 1? No ☐ Yes ☒

Title: Consultant

B. Do you, your spouse or registered domestic partner, or your dependent children have an investment of \$2,000 or more in the entity listed in Part 1 above? No ☒ Yes ☐ - value is:

☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Exceeds \$1,000,000

If you have sold or divested yourself of investments:

Date Divested: / /

C. Have you received income of \$500 or more from the entity listed in Part 1 within the last 12 months? No ☐ Yes ☒ - amount is:

☐ \$500 - \$1,000 ☒ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ Exceeds \$100,000

Was income received through your spouse or registered domestic partner? ☒ No ☐ Yes

3. Filer Information - Cont.

D. Have you received loans from the entity in Part 1 for which the balance exceeded \$500 in the past 12 months? No ☒ Yes ☐ - highest balance:

☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ Exceeded \$100,000

If you checked "yes," was the loan:

☐ Secured ☐ Unsecured Interest rate: %

Was the loan entirely repaid within the last 12 months?

☐ No ☐ Yes

E. Have you received gifts from the entity listed in Part 1 within the last 12 months valued at \$50 or more? No ☒ Yes ☐ - describe below.

Description: / /

Value: \$ / Date Received: / /

F. Has the entity in Part 1 paid you for your travel? No ☐ Yes ☒ - describe below.

Type of Payment: (check one) ☒ Salary ☐ Income

Amt: \$ / date(s): / /

Description: Hotel rooms for 2 seminars, one night each

Received
JUL 2009
Conflict of Interest
Office

4. Verification

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 6/24/09 (month, day, year)

Signature (File the originally signed statement with your university)